

# **COMMUNITY REINVESTMENT (CR) GUIDE**

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## I. INTRODUCTION

Under provisions in the Wisconsin Works Implementation Contract, agencies have been allowed access to unspent contract funding to spend on Community Reinvestment (CR) activities. Agencies are required to submit a plan to the Department of Workforce Development (DWD) outlining how they intend to spend these CR funds. CR plans should be innovative, yet must also be consistent with the requirements, purposes and allowable activities of the Temporary Assistance for Needy Families (TANF) block grant (see the federal Administration for Children and Families publication "Helping Families Achieve Self-Sufficiency").

TANF is the federal block grant that replaced Aid to Families with Dependent Children (AFDC) as part of welfare reform. TANF has four primary purposes:

1. End the dependence of families on government benefits.
2. Provide assistance that allows children to be cared for by parents or in the homes of relatives.
3. Prevent and reduce the incidence of out-of-wedlock pregnancies.
4. Encourage the formation and maintenance of two-parent families.

CR activities and services can supplement those provided under W-2 or help to fill in service gaps for the community, particularly those services which assist individuals making the transition to full time employment. Agencies are required to focus on services that strengthen attachment to the workforce, increase participants' skills and education levels, provide parenting and life skills training, and broaden the availability and extent of supportive services such as child care or transportation.

Examples of innovative programs in place across the state include: employment related transportation; budget counseling and debt management assistance; individual development accounts (IDAs); after school and weekend activities for children with parents entering full time work and the development of child care resource centers; programs targeting at-risk youth; family support services; and job retention bonuses and services.

All funds awarded under the CR program are governed by contract between DWD and the agency providing CR services. Specific details on funding levels and availability are stated in the contract. Under contractual provisions CR funding will be available from the 2000-01 W-2 contracting period. DWD will issue the requirements to be met for accessing these funds. Lastly, DWD's Administrator's Memo 00-18 is still applicable and includes information about supplementing the W-2 Contract.

**NOTE: These instructions apply to *all* agencies under contract with DWD administering a CR program.**

## II. DEVELOPING A COMMUNITY REINVESTMENT PROGRAM

Agencies must adhere to the following requirements when designing and implementing CR services:

1. All CR services provided by agencies must be consistent with the Wisconsin TANF State Plan or the purposes of TANF.
2. It is recommended that agencies not design programs and services that result in participants being considered to have received assistance as defined by the Administration for Children and Families, Department of Health and Human Services (DHHS). Receipt of CR benefits which fall into the category of assistance will result in a family having months counted toward the 60-month lifetime eligibility limit. DWD will closely review plans which propose to provide assistance. (See Part VI on Assistance)
3. Agencies must assure that the proposed CR services are over and above those required under the Wisconsin Works (W-2) and Related Programs Implementation Contract and included in the agency's W-2 Plan. This may include providing services outside those described in the W-2 Plan, providing services for a larger number of individuals or a broader range of services than those described in their W-2 Plan or providing funding for such things as work-related tools and equipment, auto repair, and emergency housing assistance.
4. CR dollars always retain their identity as TANF dollars and all TANF and other restrictions apply. For example, if an agency provides a loan program, the money repaid on a CR loan is considered TANF dollars when it returns to the agency.
5. Because CR funds are limited, agencies need to be cautious in submitting proposals that are "base builders" which require an ongoing commitment of funds. Additionally CR funding must be coordinated with other available funding sources such as Workforce Attachment and Advancement (WAA), Community Youth Grants (CYG), Literacy grants, and Alcohol and Other Drug Abuse (AODA) funding.
6. Agencies must maintain appropriate data for reporting (see Part VII on CR Program Reporting).
7. Unless they are group services, CR services are subject to the same verification requirements as other W-2 services.
  - Agencies are required to use existing CARES case information for the Food Stamp, Medical Assistance (Medicaid), or Child Care case whenever available.
  - If there is an active CARES case for the CR applicant, the entire CR application does not have to be completed. All CR applications must include an applicant signature and eligibility factors must be verified. An example of an application is included.

### III. ALLOWABLE SERVICES

CR plans must be consistent with the purposes of and include only allowable services under TANF Regulations (see Part I Introduction).

Although the following list is not exhaustive, it provides guidance as to what is an allowable service and what is not an allowable service under the CR program.

What **can not** be paid for or provided with CR funding:

- Adoption Assistance Program
  - Child Care subsidies, payment of basic Child Care Program costs, or provision of co-pay costs
  - Child Support Enforcement Program
  - Foster Care Program
  - Juvenile Justice activities
  - Kinship Care Program
  - SSI/Caretaker Supplement Program
  - Medical services
    - Medical AODA treatment such as an evaluation performed by a member of the medical profession. For further information on services covered by Medicaid refer to Department of Health and Family Services Permanent Administrative Rules (Ch 30 & Ch 100) which can be found at: [www.dhfs.state.wi.us/News/Rules/index](http://www.dhfs.state.wi.us/News/Rules/index)
- Please see medical services exceptions below under “what can be paid for or provided with CR funding”***
- New construction, additions, purchase of buildings, and purchase of real estate
  - Agency vehicle purchase or sub-leasing to a participant
  - The funding match for federal programs such as Welfare to Work (WtW)
  - Any activities which are required to be provided by the Department of Corrections
  - Any activities which are required to be provided by the Department of Public Instruction
  - Any activities which are required to be provided with W-2 funds according to the agency's W-2 contract

Following are some examples of what **can be** paid for or provided with CR funding:

- Medical Services **Exceptions:**
  - Providers may pay up to \$100 annually for medical expenses **needed for a CR participant to accept and maintain employment** such as a physical exam, weight reduction programs, dentures, eyeglasses, etc. Staff must verify that Medical Assistance will not pay for services and that the service is needed to obtain or maintain employment.
  - Pre pregnancy planning services are allowed.
- Child Care start-up costs (other than the construction or purchase of buildings, purchase of real estate), Child Care resource and referral services, and projects to improve the quality of Child Care services.
- The match for the Wisconsin Employment Transportation Assistance Program (WETAP).

- Job Center costs: When using CR funding towards Job Center costs, this funding can only be used to fund TANF eligible families for allowable activities and must be appropriately cost allocated **among all Job Center partners**.
- Transportation: loans, loan forgiveness and deferred loan programs, or grants to increase accessibility to jobs such as for the participant to get a car fixed, make a down payment on a car, or lease or purchase a car.
- Non-medical AODA and mental health services such as counseling.
- Purchase of computers for a client, payment of training or the cost of internet access for needy families to overcome the “digital divide”. Administrator’s Memo 98-24, or its replacement, contains guidelines on IT purchases and the approval process for such purchases.
- Job retention bonuses issued after participant obtains and maintains employment. It may be allowable to issue a bonus even if income has exceeded 200% of FPL since starting the job. This is allowable if the W-2 group’s income was under 200% of FPL at the time the employment was obtained and if the participant met the definition of full time employment at the time of the bonus award.
- Repairs or renovations in order to maintain the building such as painting, replacing carpeting or patching a portion of a roof. Please refer to the Financial Manual for instructions regarding depreciation for items costing greater than \$5,000.

#### IV. ELEMENTS OF A COMMUNITY REINVESTMENT PLAN OR MODIFICATION

Agencies that choose to access CR funds must submit plans to the DES Regional Offices outlining their proposal for use of the CR funds. Subsequent to Regional Office review, plans are submitted to a representative group of DES/DWD staff charged with reviewing plans and recommending approval. Plans recommended for approval by the review team are submitted to the Division Administrator’s office for final review and approval. Other than for supplementation of the Wisconsin Works (W-2) and Related Programs Implementation Contract (or future W-2 contracts as specified by DWD), each CR plan must include the required elements as outlined in **DES Administrator’s Memo 00-18** dated August 31, 2000.

##### Plan Modifications

There are two types of modifications. One type is a request to implement a project not previously approved for an agency. However the proposed CR project must have been previously approved for another agency in the state and included in DWD’s TANF State Plan. The other type is a request to make adjustments in program scope and budget for an already approved project. Deadlines applicable to each type of modification will be communicated to the agencies as necessary.

Some examples of reasons for modifications are 1) the need to increase or decrease funding for W-2 contract supplementation and the corresponding adjustment, or 2) if the projected results of the CR service are not being realized. Agencies should strive to limit the number of plan

modifications by incorporating all changes into a single modification whenever possible. The modified CR plan must include the required elements.

### **Joint CR Plans**

Multiple W-2 geographical areas that want to submit a combined CR plan may do so if all of the affected W-2 agencies agree and all of the county and/or tribal agencies served by those W-2 agencies agree to the CR plan. This combined plan could be for a single, shared project. To show this agreement, such a CR plan must have a signature page showing approval by all of the affected W-2 agencies and county or tribal executives. This policy also applies to a single county with multiple W-2 agencies.

## **V. ELIGIBILITY GUIDELINES**

**The following individuals are eligible for CR services:**

**A. Custodial parent (CP) and dependent child(ren).**

- Must have a child(ren) under age 18 (or under age 19 and is a full time student in a secondary school or its equivalent level of vocational or technical training) living in the home.
- Must cooperate in efforts to establish paternity of the dependent child(ren) and secure and enforce child support orders.

**B. Non-custodial parent (NCP)**

- Must not be living in the same home as the child(ren).
- Must be the parent of a child who resides in Wisconsin.
- Only the NCP's income is considered for eligibility purposes, not their children's financial status.
- Must cooperate in efforts to establish paternity of the dependent child(ren) and must cooperate with establishment and enforcement of child support orders.
- There is no requirement that the CP be participating in W-2 or be eligible for W-2 in order for the NCP to receive CR services. Likewise, if the CP *is* participating in W-2, NCPs are still eligible for CR services.

**C. Child in a supervised living situation (e.g., Foster Care, Kinship Care, or Group Home)**

**D. Kinship Care provider**

**E. SSI Caretaker Supplement recipient**

**F. Pregnant women with no born children**

**G. Minor parent**

Services to the individuals in the above categories, with the exception of the custodial parent and child(ren), are limited to those meeting the definition of non-assistance and group services.

**The following criteria are also required for individual CR eligibility:**

**Financial Eligibility:**

- A. Applicant's income must be at or below 200% of the federal poverty level (FPL);
  - For foster children only their personal income, not the foster family income level is to be considered.
- B. Financial eligibility is based solely on income; there is no asset limit test for the CR program;
- C. Income for the CR program is calculated using W-2 program income policies. For example, student financial aid would not be counted towards income.

**Non-Financial Eligibility:**

- A. Applicant must be a U.S. citizen or qualified alien;
- B. Applicant must be a resident of Wisconsin and, unless the applicant is a migrant worker, demonstrate an intent to continue living in the state;
- C. Applicant must cooperate, unless good cause or other exceptions exists, with efforts to establish paternity of the dependent child(ren) and secure and enforce child support orders;
- D. For assistance cases only applicant must assign the rights to any support or maintenance (child or family support) to the state;
- E. Applicant must cooperate in providing information needed to verify eligibility;
- F. Applicant must not be a fugitive felon;
- G. Applicant must not be violating a condition of probation or parole imposed under federal or state law.

**Group Services Eligibility:**

Eligibility for group services differs from individual service eligibility. It is not necessary for group service participants to complete the CR application. However in order to determine who benefits from the service for fiscal reporting purposes, agencies must implement a method to determine the percentage of TANF eligible participants in a group. We recommend administering a short application or survey which includes the following information:



- A. Wage information
- B. Number of minor children
- C. Custodial or non-custodial parent status
- D. Household size (for custodial parents only)

Agencies should utilize this information to determine if a participant meets TANF requirements for household income and parent status. The information can be self-reported, no further verification is required.

**Note on Joint Custody Cases:** In the case of joint custody by a mutually agreed to arrangement or court order, a primary caretaker must be designated by the agency. This designation must follow the guidelines set out in the Income Maintenance Manual Chapter I, Part A, 5.0.0.

#### **Further guidance on income levels and serving participants:**

##### Participants with income under 115% of the FPL

Families or individuals who are potentially W-2 eligible are to be served with W-2 contract funds when the service is included in an agency's W-2 Plan. If an individual appears to be within 115% of the FPL, DWD strongly encourages local agencies to provide information about W-2 services. Services outside of the scope of the W-2 plan may be paid for with CR dollars. These services may include assistance, non-assistance and group services.

##### Participants with income between 115% and 200% of the FPL

Services provided to families or individuals with income over the W-2 income eligibility guidelines (115%) but at or under TANF eligibility (200%) may be paid for with CR funds. Services may be non-assistance, group services or assistance as long as this assistance is not provided on a continuing basis to meet basic ongoing needs (see Section VI).

### Eligibility Review:

CR funded services provided to families may continue for a maximum of 12 months. After 12 months, a review of eligibility must be completed before further services are authorized. Participants receiving non-assistance or group services are not required to notify CR program providers of changes in income and other eligibility status within their initial 12 month period of service. However, at eligibility review, any participant found ineligible must not receive further services.

### Fact Finding:

The fact-finding process should be used to resolve any dispute over any program run by the agency, except for a program with a clearly different requirement, such as food stamps where fair hearings are still required. As agencies operating governmental programs, either the agencies or DWD has a due process duty to respond to any issue that appears to call for a hearing. The fact finding process is the best way to do that for CR.

## VI. ASSISTANCE

The following discussion reflects a combination of the federal definition of assistance and Wisconsin's implementing policy and how it impacts on CR.

CR services that are considered assistance are not prohibited but **will tick the TANF lifetime limit clock**. (*Exception: assistance is prohibited for NCPs, minor parents, pregnant women with no born children, children in a supervised living situation, Kinship Care providers, and SSI Caretaker Supplement recipients*). It is recommended that services be issued in a manner that does not result in clock ticking whenever possible. Services resulting in clock ticking are to be provided only when absolutely essential to the family's well being and with the written consent of the participant. Once the clock starts to tick, the ticks remain with the family (same as W-2) regardless of contract periods, and count toward the 60- month lifetime eligibility clock.

### Definition of Assistance

"Assistance" includes TANF funds used for cash payments, vouchers and other forms of benefits designed to meet a family's **ongoing basic needs** (food, clothing, shelter, utilities, household goods, personal care items and other general incidental expenses) even when conditioned on work participation in a work experience or community service activity. It also includes transportation, childcare and supportive services to a family that is unemployed.

**The following are not considered assistance:**

1. *Nonrecurring, short-term benefits.*

Payments which provide only short-term relief to families, are meant to address a discrete crisis situation rather than to meet ongoing or recurrent needs, and will not provide for needs extending beyond four months in a twelve-month period.

A family may receive benefits more than once, however, the expectation at the time they are granted is that the situation will not occur again and such benefits will not be provided on a regular basis. The four-month limitation is a guide to use when providing such benefits. This limitation guards against bundling several months worth of assistance into a single payment in order to avoid TANF requirements (e.g., work participation requirements, clock ticking) for the agency or for the family. The federal guidance also notes that a payment for accumulated past expenses exceeding four months may be made but a payment for future expenses exceeding four months **may not** be made.

The primary issue to keep in mind is **whether or not the benefits being provided fulfill an ongoing, basic need**. If a family's emergency is not resolvable within a reasonably short period of time, the agency must consider whether the family or individual is in need of more comprehensive assistance through W-2 or converted to a CR assistance case. DWD expects that an agency will begin ticking the clock at the month in which it is determined that a benefit is indeed a recurring benefit meeting ongoing, basic needs. If short term benefits are provided from January to March (3 months) and then benefits are provided again from September to November (3 months), this would be considered specific episodes of non-recurrent short term benefits and so there would be no ticks.

Lastly, CR may not be used as a "W-2 type benefit" for those individuals who are no longer eligible for W-2 because of time limits (24 or 60 month limit).

**Example:** Rent or security deposits, utility payments, telephone service, payment for personal care items may be made if payment for these services does not exceed 4 months in duration. There is no limit on the dollar amount an agency can spend on a family, only that the payments themselves must cease after 4 months.

**Example:** The CR participants are 5 months past due in their rent. If they can satisfy that past due accumulation and they plan to remain renting there for at least the next 12 months, a single CR payment may be made for the 5 months accumulation of **past due** rent.

2. *Work subsidies paid to employers to help offset the costs of wages, benefits, supervision or training.*

This exclusion applies to work subsidies paid to employers other than W-2 Trial Job subsidies.

**Example:** On-the-job training, paying for an on-site English as a Second Language interpreter, or paying for the employee's share of benefits.

3. *Childcare, transportation and other supportive services provided to families that are employed.*

To meet the definition of a family that is "employed" at least one eligible adult in the family must be engaged in unsubsidized employment for at least 1 hour per week or engaged in job search/readiness activities requiring child care or transportation for not longer than 4 months. If the family is not employed, the CR benefit must fall into the "non-recurrent" category in order to avoid the "assistance" definition.

**Example:** Bus passes, reimbursement for gas, or reduced fare cab rides to an employed individual or an individual looking for employment, or engaged in an internship or training program.

4. *Contributions to and distributions from IDAs.*

Some agencies may be using CR dollars to fund IDAs. See Operations Memo 00-09, for more information on IDA Programs.

**Example:** TANF-funded withdrawals from an IDA for approved purposes which include post secondary educational expenses, first home purchase, or business capitalization.

5. *Services such as counseling, case management, peer support, child care information and referral, transitional services, job retention, job advancement and other employment related services that do not provide basic income support.*

**Example:** Case management, training, workshops, non-medical AODA or Mental Health treatment, or other services non-monetary in nature.

6. *Transportation provided under the Job Access and Reverse Commute program.*

**Example:** Any transportation assistance provided or funded through the Job Access and Reverse Commute Program. (Currently only operational in Milwaukee, Winnebago, Outagamie, and Fond du Lac counties).

7. *Education or training including tuition assistance (although stipends or allowances to cover living expenses would constitute assistance).*

**Example:** Costs for tuition or books for a course of study at a technical college or educational courses that provide an employment skill and would facilitate the individual's efforts to obtain or maintain employment.

## VII. COMMUNITY REINVESTMENT PROGRAM REPORTING

CR is **not** automated in CARES. Therefore manual tracking is required.

Appropriate tracking and verification of CR activities is critical to ensure that neither DWD nor (by extension) the agencies are penalized for spending TANF dollars inappropriately. Appropriate data collection and reporting is the only means the federal DHHS has to ensure state program compliance and, as such, it is taken very seriously. DHHS has the authority to financially penalize states to up to 25% of the TANF block grant for failure to comply with program requirements such as data reporting. This data will also help in working with federal authorities in the reauthorization of TANF funding.

Agencies must submit a quarterly activity report by the 25<sup>th</sup> of the month immediately following the end of the quarter. A template for this report is included in this publication.

### Reporting Categories

#### 1. *Assistance Services:*

Services provided that meet the federal definition of assistance as described in Section VI. These services count toward the federal participation requirements and 60-month time limit. Federal reporting data must be provided at the risk of severe financial penalties. Agencies using CR funds for services of this nature need to fill out a manual data reporting form for each family. A template for this form is included in this publication.

Examples of this category include:

- Supportive services provided to a family who is not employed.
- Cash, grants or vouchers.

#### 2. *Non-Assistance Services:*

Services provided to an individual that does not meet the TANF definition of “assistance”. These services are not counted toward the 60-month lifetime limit and are not subject to the individual federal reporting requirements. Minimal individual level data must be tracked to ensure TANF eligibility. Expenditure reporting would be done in CARS.

Examples of this category include:

- Job-search activities.
- Counseling activities, such as alcohol or drug abuse (AODA) or mental health.
- Transportation.
- “Nonrecurring” or emergency services.

### 3. *Group Services:*

Examples of this category include:

- hotlines
- funding to food pantries
- funding to clothing centers
- Job Center support funding
- start up or improvement of Child Care services

### **Cost Allocation**

In order to claim reimbursement, agencies must ensure that the amount of CR dollars allocated is appropriate for the participants served by the CR project. To be approved, a CR plan that includes group services must describe the method for allocating costs that reasonably supports and justifies the amount of the CR allocation. The methodology may include participant survey data, direct data, demographic data, free and reduced price school lunch data, or CARES data. Surveys must be conducted at least on a quarterly basis with data from a sufficient number of persons to justify the cost allocation methodology. Only costs allocated for serving TANF eligible families may be claimed.

## **VIII. SUPPLANTING VS SUPPLEMENTING**

DWD will not approve CR plans which propose to use CR dollars to supplant other sources of funding. DWD considers *Supplanting* to be purposeful efforts by any CR agency to use CR funds to replace or pay for services previously financed by local, state or federal funding, and utilizing the original funding for other purposes such as tax cuts or education spending.

*Supplementing* is adding funds to make up for a deficiency or extend or strengthen what is already in existence, or to contribute to a program if no other funding is available. CR plans which propose to supplement current funding are acceptable. Using CR dollars to provide additional funding to a food pantry in order to serve a greater number of TANF eligible families is an example of supplementing.

## **IX. REFERENCES**

Listed below are sources of information related to this document which may be helpful to consult if there are further questions.

### 1. TANF Law (Title IV of the Social Security Act)

- See the following web sites: [www.ssa.gov/OP\\_Home/ssact/](http://www.ssa.gov/OP_Home/ssact/) **and**: [www.ssa.gov/OP\\_Home/ssact/title04/0400.htm](http://www.ssa.gov/OP_Home/ssact/title04/0400.htm)

For major federal prohibitions on the use of TANF see sections 408 and 409 of this act, or 42 USC 608 and 609.

2. TANF final regulations

- See the following web sites: [www.acf.dhhs.gov/programs/ofa/](http://www.acf.dhhs.gov/programs/ofa/) **and** [www.acf.dhhs.gov/programs/ofa/finalru.htm](http://www.acf.dhhs.gov/programs/ofa/finalru.htm)

3. Administration for Children and Families website: [www.acf.dhhs.gov](http://www.acf.dhhs.gov)

- See TANF questions and answers
- “Helping Families Achieve Self-Sufficiency”  
[www.acf.dhhs.gov/programs/ofa/funds2.htm](http://www.acf.dhhs.gov/programs/ofa/funds2.htm)

4. OMB Circulars

- See Bureau of Division-wide Services web site for links to relevant circulars:  
[www.dwd.state.wi.us/des/bmo/bmo.htm](http://www.dwd.state.wi.us/des/bmo/bmo.htm)

5. TANF State Plan: [www.dwd.state.wi.us/desw2/Final\\_Pln.htm](http://www.dwd.state.wi.us/desw2/Final_Pln.htm)

6. Administrator’s Memos: 98-24, 99-25, 00-18

See the following website: <http://workweb.dwd.state.wi.us/notespul/admemos/>

## COMMUNITY REINVESTMENT QUARTERLY REPORT

Quarter:        1            2            3            4                      Year             
                  (Jan- Mar)    (Apr -Jun)    (Jul-Sep)    (Oct-Dec)

W -2 Contract Agency # \_\_\_\_\_

[illegible]

**Comments :**

[illegible]

**Contact Information :**

A. W-2 Contract Agency Contact Person

Signature : \_\_\_\_\_

Name (Please Print): \_\_\_\_\_

Area Code / Phone #: ( )

Email Address: \_\_\_\_\_

### B. Regional Office Contact Person

Signature: \_\_\_\_\_

Name (Please Print): \_\_\_\_\_

Area Code / Phone #: ( ) \_\_\_\_\_



# INSTRUCTIONS

## COMMUNITY REINVESTMENT QUARTERLY REPORTING

### PURPOSE

This report must be completed each quarter in which there were Community Reinvestment expenditures other than as a W-2 supplement. The purpose of the report is to record the number of participants served in activities described in your Community Reinvestment Plan and match them to the fiscal service category you used to report the expenditures.

### INSTRUCTIONS

#### ITEM

#### ENTRY

Quarter	Mark the report quarter
Year	Enter the 4 digit calendar year (for the report quarter)
W-2 Contract Agency #	Enter your contract agency number (see attached list)
CR Plan Activity	Describe the activity as identified in your Community Reinvestment plan. <u>Limit</u> entry to 35 positions, including spaces
<u>G</u> roup or <u>I</u> ndividual	Enter <b>G</b> if it was a group activity Enter <b>I</b> if it was an individual activity (See definition of group and individual activities.)

Fiscal Reporting Enter the profile for the fiscal service category you used to charge this activity:  
Category

4002	CR Work Activities
4003	CR Education
4004	CR Family Preservation and Parenting Training
4005	CR Post Employment Services
4006	(not a valid code)
4007	CR Human Services AODA
4008	CR Human Services Domestic Abuse
4009	CR Human Services Child Abuse
4010	CR Youth Services
4011	CR Housing
4012	CR Child Care
4013	CR Loan Program
4014	CR Grant Program
4015	CR Transportation
4016	CR Other Assistance Payment ( <b>Use <u>only</u> when the TANF <u>clock ticks</u></b> )
4017	CR Individual Development Account (IDA)

Served By TANF Count	Enter the number of TANF participants served by the activity. (Note: if the activity occurred more than once during the quarter only count each participant once.)
Total Served Count	Enter the total number of families served by the activity. (Note if the activity occurred more than once during the quarter, only count each family once.)
Ticked Clock Count	Enter the number of families for whom the TANF clock ticked as a result of an activity (see definition of "assistance"). If there were none, enter a zero.



Note: Based on reviewed agency plans, there should be very few instances when this happens. If it does, additional information and actions will be required: W-2 Community Reinvestment Manual Data Report should be completed and attached.

Use this only with Fiscal Reporting Category 4016.

**Comment** Use the comments portion to provide additional information.

**Contact Information** W-2 Contract Agency and Regional Office staff should provide the contact information requested in the event any questions arise with report entries.

### Submittal

Submit each quarterly report to the W-2 Contract Manager by the 25<sup>th</sup> of the month immediately following the end of the quarter. The W-2 Contract Manager will review each report and request clarification or corrections if there are any problems with the reports.

### Summary Information

Data from the quarterly reports will be keyed and summarized. Reports will be created and made available to local agencies.

### Questions

Submit questions to your W-2 Contract Manager.

### W-2 Contract Agency #

#	Agency
01	ADAMS W-2
02	ASHLAND W-2
03	BARRON W-2
04	BAYFIELD
05	BROWN W-2
06	BUFFALO
07	BURNETT
08	CALUMET
09	CHIPPEWA W-2
10	CLARK W-2
11	COLUMBIA W-2
12	CRAWFORD W-2
13	DANE W-2
14	DODGE W-2
15	DOOR W-2
16	DOUGLAS W-2
17	DUNN W-2
18	EAU CLAIRE W-2
19	FORWARD SERV (Florence)
20	FOND DU LAC W-2
24	GREEN LAKE W-2
26	IRON W-2
27	JACKSON W-2
28	JEFFERSON W-2

#	Agency
29	WESTERN WIS (Juneau)
30	KENOSHA W-2
31	FORWARD SERV (Kewaunee)
32	LA CROSSE W-2
34	LANGLADE W-2
35	LINCOLN W-2
36	MANITOWOC W-2
37	MARATHON W-2
38	MARINETTE W-2
39	MARQUETTE W-2
41	WESTERN WIS (Monroe)
42	OCONTO W-2
44	OUTAGAMIE W-2
45	OZAUKEE W-2
46	PEPIN W-2
47	PIERCE W-2
48	POLK W-2
49	PORTAGE W-2
50	PRICE W-2
51	RACINE W-2
53	ROCK W-2
54	RUSK W-2
55	ST. CROIX W-2
56	SAUK W-2

#	Agency
57	SAWYER W-2
58	SHAWANO W-2
59	SHEBOYGAN W-2
60	TAYLOR W-2
61	TREMPEALEAU W-2
62	VERNON W-2
64	KAISER GROUP (Walworth)
65	WASHBURN (W-2)
66	WASHINGTON W-2
67	CURTIS & ASSOC (Waukesha)
68	WAUPACA W-2
69	WAUSHARA W-2
70	WINNEBAGO W-2
71	WOOD W-2
72	MENOMINEE W-2
75	MILWAUKEE YW-WORKS
76	MILWAUKEE UMOs
77	MILWAUKEE OIC-GM
78	MILWAUKEE MAXIMUS
80	MILWAUKEE EMPLOYME
81	FORWARD SERV (FOV)
82	W-2 SOUTHWEST CONS
89	BAD RIVER W-2
92	ONEIDA TRIBE W-2

# MODEL

## W-2 COMMUNITY REINVESTMENT PARTICIPANT APPLICATION

<b>COMMUNITY REINVESTMENT SERVICE:</b>					
<b>CASEHEAD INFORMATION:</b> Name				Social Security Number	
Sex: ? Male                      ? Female				Date of Birth	Marital Status
Address		City		State	Zip Code
Mailing Address (if different)				Home Telephone Number (       )	
U.S. Citizen    ? Yes    ? No                      Qualified Alien    ? Yes    ? No			Alien Registration Number		
Check the ethnic group of the person applying. You do not have to answer this question, but it will help determine compliance with the Federal Civil Rights Act of 1964. Your answer will not affect your application.					
<input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian or Pacific Islander					
Are you the parent of a child(ren) under the age of 18?				? Yes                      ? No	
Does your child(ren) live with you?				? Yes                      ? No	
<b>Family Income: list all family members income</b>					
<b>Employment Income (Including Self-Employment)</b>					
Family Member	Employer		Monthly Gross Income	Weekly Hours	
			\$		
			\$		
			\$		
<b>Unearned Income</b> (such as child support, SSI, SSDI, inheritance, retirement, interest, grants, charity)					
Family Member	Source		Amount per Month		
			\$		
			\$		
			\$		
<b>Basic Family Information</b> <b>List all family members who live with you, providing the following information</b>					
Names	Ethnic Group	Citizenship	Birth Date	Relationship to Casehead	SSN
<b>W-2 AGENCY DETERMINATION:</b> Will the Community Reinvestment Service result in benefits that meet the federal definition of “assistance” and result in time applied toward the 60-month lifetime limit?                      ? Yes                      ? No					
<b>IF THE RESPONSE IS “NO,” STOP HERE. READ AND SIGN PAGE 3 OF THIS</b>					

**APPLICATION.**

**IF THE RESPONSE IS “YES,” PLEASE CONTINUE TO THE NEXT PAGE.**

**CONTINUE TO RESPOND IF ASSISTANCE WILL BE PROVIDED THAT MUST COUNT TOWARD THE 60-MONTH TIME LIMIT.**

Are you age 18 or older? ? Yes                      ? No

Are you a Wisconsin resident? ? Yes                      ? No

Is there any member of the household who is a fleeing felon  
avoiding prosecution, or who is violating a condition of probation or parole  
or who is a convicted drug felon since August 22, 1996? ? Yes                      ? No

If yes, write in name or names. \_\_\_\_\_

Highest Grade Completed: \_\_\_\_\_

Highest Educational Degree Attained

? Grade School              ? GED                      ? High School Diploma  
? Technical College                      ? University/College  
? College Degree(s) (list)

Are you receiving Supplemental Security Income (SSI)? ? Yes                      ? No

Are you receiving Social Security Disability Insurance (SSDI)? ? Yes                      ? No

Are you willing to do **all** of the following? ? Yes                      ? No

- give or apply for Social Security Numbers as required?
- report changes (example: family or job status, finances) that may affect your eligibility within ten (10) days?
- cooperate with the child support agency?

**Absent Parent Information**

Child(ren)'s Name(s)	Absent Parent's Name	Absent Parent's Social Security #

## SIGN IN THE PRESENCE OF AN AGENCY REPRESENTATIVE

### VERIFICATION

I authorize the W-2 agency, county or tribal human/social services agency and the Department of Workforce Development to request and receive any information that is appropriate and necessary for the proper administration of the Community Reinvestment services. Sources of information may include, but are not limited to, the Internal Revenue Service, Social Security Administration, Unemployment Insurance Division, and the Department of Transportation. I also understand that any person, including any financial institution, credit reporting agency, employer, or educational institution is authorized to release this information, according to Wisconsin Statute, s.49.22(2m) and s.49.143(5)(a).

"The department may request from any person any information it determines appropriate and necessary for the administration of this section, ss. 49.19, 49.46, 49.468 and 49.47 and programs carrying out the purposes of USC 2011-2029. Any person in this state shall provide this information within seven days after receiving a request under this subsection."

### DISCLOSURE/CONSENT

I understand that information on my previous wages and employment from the records of the Unemployment Insurance program may be shared with the W-2 agency (which may be either a public or a private organization) to verify the accuracy of the information provided on this application.

**I understand the questions and statements on this application form. I understand the penalties for giving false information or breaking the rules. I certify, under penalty of law, that my answers are correct and complete to the best of my knowledge, including information about the citizenship or alien status of each household member. I agree to provide documents to prove what I said. I understand that the W-2 agency may contact other persons or organizations to obtain necessary proof of my eligibility and level of benefits.**

Did the Community Reinvestment Service provide benefits that must be applied toward the 60-month lifetime limit?

? Yes

? No

? **If the answer is YES, I have been provided with information regarding time limited benefits, including the Guide to Time Limits pamphlet. I agree and understand that the service(s) received will be applied toward my 60-month lifetime benefit limit.**

Signature of Primary Person

Date

Signature of Other Adult

Date

Signature of Authorized Representative

Date

Signature of Agency Witness

Date

# TEMPLATE

# W-2 COMMUNITY REINVESTMENT MANUAL DATA REPORT

W-2 AGENCIES MUST SUBMIT THIS FORM FOR FEDERAL REPORTING PURPOSES FOR COMMUNITY REINVESTMENT SERVICES THAT MEET THE FEDERAL DEFINITION OF ASSISTANCE, AND MUST COUNT TOWARD THE 60-MONTH LIFETIME LIMIT. **THIS FORM ALSO DOCUMENTS TANF ELIGIBILITY. W-2 AGENCIES THAT FAIL TO COLLECT AND PROVIDE DATA FOR CASES MEETING THE DEFINITION OF ASSISTANCE DO SO AT THEIR OWN RISK.**

W-2 Agency			Reporting Month		
Community Reinvestment Services			Benefit Amount		
CASEHEAD INFORMATION Name				Social Security Number	
Sex: ? Male                      ? Female				Date of Birth	Marital Status
U.S. Citizen?              ? Yes                      ? No			Alien Registration Number		
Qualified Alien?        ? Yes                      ? No					
Check the ethnic group of the person applying. You do not have to answer this question, but it will help determine compliance with the Federal Civil Rights Act of 1964. Your answer will not affect your application.					
<input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian or Pacific Islander					
Highest Grade Completed: _____			Highest Educational Degree Attained <input type="checkbox"/> Grade School <input type="checkbox"/> GED <input type="checkbox"/> High School Diploma <input type="checkbox"/> Technical College <input type="checkbox"/> University/College <input type="checkbox"/> College Degree(s) (list)		
Is person disabled receiving Supplemental Security Income (SSI)?                      ? No                      ? Yes					
Is person disabled receiving Social Security Disability Insurance (SSDI)?                      ? No                      ? Yes					
<b>Basic Family Information</b>					
Names	Relationship to Casehead	Citizenship	Ethnic Group	Birth Date	Highest Educational Level Attained Highest Educational Degree Attained
<b>Family Income: list all family members income</b>					
<b>Employment Income (Including Self-Employment)</b>					
Family Member	Employer			Monthly Gross Amount	Weekly Hours
				\$	
				\$	
				\$	
<b>Unearned Income</b> (such as child support, SSI, SSDI, inheritance, retirement, interest, grants, charity)					
Family Member	Source			Amount per Month	
				\$	
				\$	
				\$	
<b>Participation Requirements</b>					
Component:			Assigned Hours:		

Component:	Assigned Hours:
Component:	Assigned Hours: